

(77) PCT

US

PCT Applicant's Guide - Volume II - National Chapter - US

Form 100, page 1

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Patenting Trademarks Office, U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.DECLARATION FOR
UTILITY OR DESIGN
PATENT APPLICATION☒ Declaration OR
Submitted
with Initial Filing ☐ Declaration
Submitted after
Initial Filing

Attorney Docket Number	102.174
First Named Inventor	J.R. GAL, et al
COMPLETE IF KNOWN	
Application Number	PCT/FR99/00792
Filing Date	April 6, 1999
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

LIPOPEPTIDES INDUCING T LYMPHOCYTIC CYTOTOXICITY BEARING AT
LEAST ONE AUXILIARY T EPITOPE, AND USES FOR VACCINATION

(Title of the invention)

This specification of which

☐ is attached hereto
OR☒ was filed in (MM/DD/YYYY)

04/06/99

as United States Application Number or PCT International

Application Number PCT/FR99/00792 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or §365(a) of any foreign application(s) for patent or inventor's certificate, or §365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached	
				YES	NO
98 04323	France	04/07/98	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
PCT/FR99/00792 PCT		04/06/99	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto.

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

☐ Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

(Page 1 of 5)

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner of Patents and Trademarks, Washington, DC 20231.

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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DECLARATION

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(e) of any PCT international application designating the United States of America, listed below and, hereinafter as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office concerning the results:

Name	Registration Number	Name	Registration Number
Bierman, Muserlian and Lucas	18,818		
Jordan B. Bierman	18,629		
Charles A. Muserlian	19,683		
Donald C. Lucas	31,275		

☐ Additional registered practitioner(s) named on a supplemental sheet attached hereto.

Direct all correspondence to:

Name: Charles A. Muserlian
Address: Bierman, Muserlian and Lucas
Address: 600 Third Avenue
City: New York State: NY ZIP: 10016
Country: U.S.A. Telephone: (212) 661-8000 Fax: (212) 661-8002

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

☐ A petition has been filed for this unsigned inventor

Name of Sole or First Inventor:			
Given Name	Frederique Anne	Middle Initial	Family Name LE GAL
Inventor's Signature			Date Nov 30, 2000
Residence: City	Vincennes	State	France FRX
Post Office Address	21 rue de Donjon, 94300 Vincennes, France		
City	Vincennes	State	France
Zip	F-94300	Country	France

☒ Additional inventors are being named on supplemental sheet(s) attached hereto

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
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Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
--	---

Given Name Jean Gerard	Middle Initial	Family Name GUILLET	Suffix e.g. Jr.
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Inventor's Signature 	Date X 11/30/2000
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Residence: City Vanves	State	Country France	Citizenship FRX France
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Post Office Address 39 rue Raphael, 92170 Vanves, France	
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Post Office Address	
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City Vanves	State	Zip F-92170	Country France
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Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
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Given Name Harine	Middle Initial	Family Name GAHERY-SECARD	Suffix e.g. Jr.
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Inventor's Signature 	Date X 11/30/2000
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Residence: City Paris	State	Country France	Citizenship FRX France
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Post Office Address 14 rue Baucelle, F-75014 Paris, France	
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Post Office Address	
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City Paris	State	Zip F-75014	Country France
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Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
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Given Name Helene	Middle Initial	Family Name GRAS-MASSE	Suffix e.g. Jr.
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Inventor's Signature 	Date X 12/4/2000
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Residence: City Merignies	State	Country France	Citizenship FRX France
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Post Office Address 321 rue de la Rosiere, F-59710 Merignies, France	
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Post Office Address	
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City Merignies	State	Zip F-59710	Country France
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Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor
--	---

Given Name Oleg	Middle Initial	Family Name MELNYK	Suffix e.g. Jr.
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Inventor's Signature 	Date X 2/04/2000
--------------------------	----------------------------

Residence: City MONS-en-BAROEUL	State	Country France	Citizenship FRX France
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Post Office Address 9, rue Gabriel Peri, F-59370 MONS-en-BAROEUL, France	
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Post Office Address	
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<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto			
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Annex US.III, page 3

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Andre	Middle Initial	Family Name TARTAR
Inventor's Signature	[Signature]		Date 28-3-0
Residence: City	VITRY-en-ARTOIS	State	Country France FRX
Post Office Address	1 rue du Marlin, 62490 VITRY-en-ARTOIS, France		
City	VITRY-en-ARTOIS	State	Zip F-62490
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name		Middle Initial	Family Name
Inventor's Signature			Date
Residence: City		State	Country
Post Office Address			
City		State	Zip
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name		Middle Initial	Family Name
Inventor's Signature			Date
Residence: City		State	Country
Post Office Address			
City		State	Zip
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name		Middle Initial	Family Name
Inventor's Signature			Date
Residence: City		State	Country
Post Office Address			
City		State	Zip
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name		Middle Initial	Family Name
Inventor's Signature			Date
Residence: City		State	Country
Post Office Address			
City		State	Zip
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto			